



STEVEN L. BESHEAR  
GOVERNOR

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SECRETARY

**PUBLIC PROTECTION CABINET**  
**DEPARTMENT OF HOUSING, BUILDINGS AND CONSTRUCTION**  
DIVISION OF HVAC  
101 SEA HERO ROAD, SUITE 100  
FRANKFORT, KENTUCKY 40601-5405  
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**FORMAL CONSUMER COMPLAINT**

**Site of Complaint** \_\_\_\_\_  
*County City Street or Road*

**Owner(s) Name** \_\_\_\_\_ **Home Phone #** \_\_\_\_\_

**Address** \_\_\_\_\_  
*Street or P O Box Address City County Zip*

**Company Name** \_\_\_\_\_

**Company Owner(s) Name** \_\_\_\_\_ **Master License #** \_\_\_\_\_

**Address** \_\_\_\_\_  
*Street or P O Box Address City County Zip*

**Company Phone #** \_\_\_\_\_ **Date of Installation** \_\_\_\_\_

The Board may revoke, suspend, place on probation or restrict the license or certificate of any licensee or certificate holder; refuse to issue or renew a license or certificate; or reprimand, censure, or fine a licensee or certificate holder for violation of KRS 198B.650 to KRS 198.689.

**Check all that applies below.**

☐ HVAC person **not** licensed.

☐ Incompetence of or deliberate disregard and violation of building codes and applicable codes.

☐ Faulty installation, maintenance, alteration or repair of:

☐ Heating System ☐ Cooling System ☐ Ventilation System

☐ Other \_\_\_\_\_

☐ **There is currently ongoing court litigation in this matter in** \_\_\_\_\_ **County.**

I understand and agree that I may be subpoenaed to testify if a hearing is held before the HVAC Board as a result of this formal consumer complaint.

**Owner(s) Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



Equal Opportunity Employer M/F/D

**System:**

**\*\*Your view as to how this matter should be resolved\*\***

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